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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Estes, Ron, , ,					1			
	(b) Address (number and street) 12224 E Bracken Ct	<b>X</b> C	heck if addre	ess changed	I	2. Candidate's FEC Idea H8KS04112	ntification Number		
	(c) City, State, and ZIP Code					3. Is This			
	Wichita		K	672	06-4126	Statement X (N	) <b>OR</b> (A)		
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate			
	REPUBLICAN PARTY	House			KS	04			
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	N COMMITTEE			
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	Ron Estes For Congress								
_	(b) Address (number and street)								
	12224 E Bracken Ct								
	(c) City, State, and ZIP Code								
	Wichita				KS	67206-4126			
8.	I hereby authorize the following nancandidacy.  NOTE: This designation should be formula in the state of the	ned committee,	which is NO	T my princi		•	pend funds on behalf of my		
(a) Name of Committee (in full)  Encouraging Learning And Skills PAC									
	(b) Address (number and street)								
	1666 K St NW								
	Ste 500								
	(c) City, State, and ZIP Code								
	Washington				DC	20006-1218			
	I certify that I have exa	mined this Stat	ement and to	o the best o	f my knowledge a	nd belief it is true, correct	and complete.		
Si	gnature of Candidate					Date			
	stes, Ron, , ,								
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			[Ele	ctronically Filed]	05/31/2017			
NO	OTE: Submission of false, erroneous	, or incomplete	information r	may subject	the person signin	ng this Statement to penal	ties of 2 U.S.C. §437g.		
1				1					

FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F2N Transaction ID :

Form/Schedule: Transaction ID:

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is N candidacy.	NOT my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE: This designation should be filed with the pri	ncipal campaign committee.	
(a) Name of Committee (in full)  Team Estes		
(b) Address (number and street) PO Box 26141		
(c) City, State and ZIP Code		_
Alexandria	VA 22313-6141	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is I candidacy.	NOT my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE:This designation should be filed with the pri	incipal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is I candidacy.	NOT my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE: This designation should be filed with the pri	incipal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		